



Fill in all ovals that apply:

- ☐ Name or filing status has **changed** since last filing
- ☐ Address has **changed** since last filing
- ☐ Virginia return was not filed last year
- ☐ Accelerated Refund Request
- ☐ Return adjusted for fixed date conformity
- ☐ Dependent on another's return with unearned income
- ☐ Amended Return - Fill in oval if result of NOL

First 4 letters of
your last name

First 4 letters of spouse's last name

Locality Code
See instructions

Page 10

Exemptions

- (1) Single. Did you claim federal head of household? Yes
- (2) Married filing joint return (Enter spouse's SSN above)
- (3) Married filing separate return (Enter spouse's SSN above)
Spouse's Name

You + 55 or over Blind Dependents Total Exemptions Use Total Exemptions to complete Line 11

Spouse if filing joint return + + + =

1.	Federal Adjusted Gross Income <i>(from federal return - NOT FEDERAL TAXABLE INCOME)</i>	1
2.	Total Additions from attached Schedule ADJ, line 3..... (You must attach Schedule ADJ)	2
3.	Add lines 1 and 2	3
4.	Deduction for age on Jan 1, 2004. Each filer age 62-64: \$6,000; each filer 65 or over: \$12,000	4
You	<div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div>	.00 + Spouse
	<div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin-bottom: 2px;"></div>	.00 =
4		00
5.	Social Security Act and equivalent Tier 1 Railroad Retirement Act benefits (reported as taxable on federal return)	5
6.	State Income Tax refund or overpayment credit (reported as income on federal return)	6
7.	Subtractions from attached Schedule ADJ, line 7..... (You must attach Schedule ADJ)	7
8.	Add lines 4, 5, 6, and 7	8
9.	Virginia Adjusted Gross Income (VAGI) - Subtract line 8 from line 3	9
10.	Deductions-Enter Standard: Filing Status 1 = \$3,000; 2 = \$5,000; 3 = \$2,500 OR Itemized:	10
10a.	Total deductions - see instructions	10a
10b.	State and Local Income Taxes claimed	10b
(You <u>MUST</u> USE ITEMIZED DEDUCTIONS IF YOU ITEMIZED ON YOUR FEDERAL RETURN)		
11.	Exemptions. Multiply number of Total Exemptions claimed above by \$800	11
12.	Child and Dependent Care Expenses. See Instructions	12
13.	Add lines 10, 11 and 12	13
14.	Virginia Taxable Income - Subtract line 13 from line 9	14



Your SSN

--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

--	--	--	--	--	--	--	--	--	--

 00

15. Amount of Tax from Tax Table or Tax Rate Schedule (round to whole dollars) 15

16. Spouse Tax Adjustment. For Filing Status 2 only. Enter **VAGI** in whole dollars below. See instructions.

16a - Enter Your VAGI below

16b - Enter Spouse's VAGI below

--	--	--	--	--	--	--	--	--	--

 .00

--	--	--	--	--	--	--	--	--	--

 .00

17. **Net Amount of Tax - Subtract line 16 from line 15** 17

18. Virginia tax withheld for 2003.

18a. Your Virginia withholding 18a

18b. Spouse's Virginia withholding (filing status 2 only) 18b

19. Estimated Tax Paid for tax year 2003 (from Form 760ES) 19
(include overpayment credited from tax year 2002)

20. Extension Payments (from Form 760E) 20

21. Tax Credit for Low Income Individuals from **attached** Schedule ADJ, line 12 21

22. Credit for Tax Paid to Another State from **attached** Sch. ADJ, line 19 or Sch. OSC, line 41 22
(You must attach Sch. ADJ or Sch. OSC and a copy of all other state returns)

23. Other Credits from **attached Schedule CR** 23
(If claiming Political Contribution Credit only - fill in oval - see instructions)

24. **Add lines 18a, 18b and 19 through 23** 24

If you are filing an Amended Return, stop here and GO TO line 27 of Schedule ADJ

25. If line 24 is less than line 17, subtract line 24 from line 17. This is the Tax You Owe 25
Skip to line 28

26. If line 17 is less than line 24, subtract line 17 from line 24. This is Your Tax Overpayment 26

27. Amount of overpayment you want credited to next year's estimated tax 27

28. Adjustments and Voluntary Contributions from **attached** Schedule ADJ, line 26 28
(You must attach Schedule ADJ)

29. Add line 27 and line 28 29

30. If you owe tax on line 25, add lines 25 and 29. **OR**
If line 26 is less than line 29, subtract line 26 from line 29. **AMOUNT YOU OWE** 30

CREDIT CARD FILL IN OVAL IF PAYING BY CREDIT CARD - SEE INSTRUCTIONS

31. If line 26 is greater than line 29, subtract line 29 from line 26. **YOUR REFUND** 31

Direct Deposit Information

Refund Only

Please indicate type of account

☐ Checking ☐ Savings

--	--	--	--	--	--	--	--	--	--

Your bank's routing transit number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Your bank account number

Fill in all ovals that apply:

☐ Qualifying farmer, fisherman or merchant seaman

☐ I authorize the Dept. of Taxation to discuss my return with my preparer.

☐ Coalfield credit earned

☐ Primary taxpayer deceased

☐ Fill in oval if return was completed by a paid preparer

☐ Spouse deceased

☐ Overseas on due date

I (We), the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) knowledge, it is a true, correct and complete return.

Your Signature

Date

Spouse's Signature

Date

Your business phone number

--	--	--	--	--	--	--	--	--	--

Home phone number

--	--	--	--	--	--	--	--	--	--

Spouse's business phone number

--	--	--	--	--	--	--	--	--	--

Preparer's Name (please print)

Phone Number

Date

SEE INSTRUCTIONS FOR ADDRESS TO MAIL YOUR RETURN